## DEPARTMENT OF HEALTH AND HUMAN SERVICES

**Health Resources and Services Administration** 

Agency Information Collection Activities: Submission to OMB for Review and Approval; Public Comment Request; Information Collection Request Title: The Maternal, Infant, and Early Childhood Home Visiting Program Quarterly Performance Report, OMB No. 0906-0016, Revision

**AGENCY:** Health Resources and Services Administration (HRSA), Department of Health and Human Services.

**ACTION:** Notice.

**SUMMARY:** In compliance with of the Paperwork Reduction Act of 1995, HRSA has submitted an Information Collection Request (ICR) to the Office of Management and Budget (OMB) for review and approval. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from the public during the review and approval period. OMB may act on HRSA's ICR only after the 30 day comment period for this Notice has closed.

DATES: Comments on this ICR should be received no later than [INSERT DATE 30 DAYS AFTER DATE OF PUBLICATION IN THE FEDERAL REGISTER].

ADDRESSES: Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. Find this particular information collection by selecting "Currently under Review - Open for Public Comments" or by using the search function.

**FOR FURTHER INFORMATION CONTACT:** To request a copy of the clearance requests submitted to OMB for review, email Samantha Miller, the HRSA Information Collection Clearance Officer at paperwork@hrsa.gov or call (301) 443-9094.

## SUPPLEMENTARY INFORMATION:

Information Collection Request Title: Maternal, Infant, and Early Childhood Home Visiting Program Quarterly Performance Report, OMB NO. 0906-0016, Revision

Abstract: This clearance request is for continued approval of the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program Quarterly Performance Report. The MIECHV Program, administered by HRSA in partnership with the Administration for Children and Families, supports voluntary, evidence-based home visiting services during pregnancy and to parents with young children up to kindergarten entry. States, certain non-profit organizations, and Tribal entities are eligible to receive funding from the MIECHV Program and have the flexibility to tailor the program to serve the specific needs of their communities.

A 60-Day notice was published in the *Federal Register*, 86 Fed. Reg. 35809 (July 7, 2021). There were two public comments. These comments expressed support for proposed updates to definitions of key terms and provided suggestions to improve clarity and reduce reporting burden related to quarterly information reporting. HRSA appreciates these comments and suggestions to the information collection. Comments also raised questions about existing guidance that do not appear to require amendments to the guidance and that HRSA therefore intends to address through technical assistance. After taking these comments into consideration, HRSA intends the following proposed revisions to Form 4:

- Form 4, Reporting guidance: Revise reporting instructions and links to reflect updated reporting requirements
- Form 4, Definition of Key Terms: Update definitions for Table A.1
- Form 4, Definition of Key Terms: Add definitions for Table A.2
- Form 4, Due date: The due date will be revised to 45 days after the end of each reporting period.

HRSA requests approval to expand the use of Form 4 in order to collect quarterly performance data from awardees who receive MIECHV funding appropriated by section 9101 of the American Rescue Plan Act (Pub. L. 117-2).

Need and Proposed Use of the Information: HRSA uses quarterly performance information to demonstrate program accountability and continuously monitor and provide oversight to MIECHV Program awardees. The information is also used to provide quality improvement guidance and technical assistance to awardees and help inform the development of early childhood systems at the national, state, and local level. HRSA seeks to revise reporting instructions and definitions of key terms and to expand the use of Form 4 in order to collect distinct quarterly performance data related to the use of American Rescue Plan Act funds. This notice is subject to the appropriation of funds, and is a contingency action taken to ensure that, should funds become available for this purpose, information can be collected in a timely manner.

*Likely Respondents*: MIECHV Program awardees are states, jurisdictions, and, where applicable, nonprofit organizations receiving MIECHV funding to provide home visiting services within states.

Burden Statement: Burden in this context means the time expended by persons to generate, maintain, retain, disclose, or provide the information requested. This includes the time needed to review instructions; to develop, acquire, install, and utilize technology and systems for the purpose of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information; to search data sources; to complete and review the collection of information; and to transmit or otherwise disclose the information. The total annual burden hours estimated for this ICR are summarized in the table below.

Total Estimated Annualized Burden Hours:

	Number of	Number of	Total	Average Burden per	Total Burden
	Respondents	Responses per	Responses	Response (in hours)	Hours
Form Name		Respondent			
Form 4: Section A –					
Quarterly					
Performance Report	56	8	448	24	10,752

Form 4: Section B					
— Quarterly					
Benchmark					
Performance					
Measures	10	4	40	200	8,000
	1				
Total	561		488		18,752

<sup>1</sup> The 10 responses for Section B are a sub-set of 56 total awardees funded through the MIECHV Program

HRSA specifically requests comments on (1) the necessity and utility of the proposed

information collection for the proper performance of the agency's functions, (2) the accuracy of

the estimated burden, (3) ways to enhance the quality, utility, and clarity of the information to be

collected, and (4) the use of automated collection techniques or other forms of information

technology to minimize the information collection burden.

Maria G. Button,

Director, Executive Secretariat.

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